

SAMPLE – School Data Collection Form

2006 Physical Fitness Test

This form is for your convenience in collecting data for electronic submission. Please do not send this form to EDS.

A. County – District – School Code: _____ – _____ – _____

B. School District Name: _____

C. School Name: _____

D. Charter School Number: _____ ('0000' for dependent charters or public schools)

E. Grade Level:	05	07	09
F. Number of students in this grade at this school: (Use current enrollment.)			
G. Number of students tested:			
H. Reason students not tested: (Provide a count of students for each reason.)			
Absent on test date and all make-up sessions			
Waiver granted by the State Board of Education			
Individualized education program (IEP)/Disabilities			
Extraordinary circumstances			
Medical excuse			
Total number of students not tested:			